

1st Evaluation (Day of Training) Distance Learning Training

Training Completion Date _____

1. What trainings did you complete? ☐ D.L. Policy Training ☐ D.L. Instructor Training
☐ SkillsTutor ☐ Crossroads Café ☐ GED Connections ☐ Achieving TABE Success

2. Did these trainings assist you in understanding the **purpose** of Distance Learning? ☐ Yes ☐ No

The purpose is to: _____

3. Did these trainings assist you in understanding the **process** of using D.L. with students? ☐ Yes ☐ No

List the steps you must use to start a student in any of the Distance Learning curriculum.

4. Did these trainings provide enough information for you to use applicable Distance Learning Curriculum? ☐ Yes ☐ No

If no, what other information would be helpful? _____

5. Do you have any remaining questions about Distance Learning? ☐ Yes ☐ No

If so, please list your questions: _____

6. In what way(s) were the trainings effective? _____

7. How could the trainings be improved? _____

